

RULE 63 (37 C.F.R. 1.63)
DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

- ☒ Declaration submitted with initial filing.
☐ Declaration submitted after initial filing (surcharge required under 37 CFR 1.16 (e)).

As a below named inventor, I hereby declare that:

my residence, mailing address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of which

- ☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) _____ as United States Application No. or PCT International Application No. _____ and was amended on (MM/DD/YYYY) _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN OR PCT INTERNATIONAL APPLICATION(S)

Application Number(s)	Country	Foreign Filing Date MM/DD/YYYY	Priority Claimed	
			YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below, and I hereby claim the benefit under 35 U.S.C. 120 of all United States applications listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in such prior applications in the manner provided by the first

paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose material information as defined in 37 C.F.R. 1.56(a) which occurred between the filing date of the prior applications and the filing date of this application.

PROVISIONAL OR PRIOR U.S. APPLICATION(S)

<u>Application No(s).</u>	<u>Filing Date</u> <u>MM/DD/YYYY</u>	<u>Status</u> <u>Granted, Pending, Expired</u>
09/439,482	November 12, 1999	Pending
09/422,215	October 19, 1999	Pending
60/108,444	November 13, 1998	Pending
60/108,442	November 13, 1998	Pending
60/108,229	November 13, 1998	Pending

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

And I hereby appoint IRELL & MANELLA LLP, 1800 Avenue of the Stars, Suite 900, Los Angeles, California 90067, telephone number (310) 277-1010 (direct all communications to Rachele Wittwer) and

<u>Attorney</u>	<u>Reg. No.</u>	<u>Attorney</u>	<u>Reg. No.</u>
Norman E. Brunell	26,533	Andrei Iancu	41,862
Ben Yorks	33,609	Babak Redjaian	42,096
Gary N. Frischling	35,515	Paul Backofen	42,278
Sharon Wong	37,760	Robert Popa	43,010
Kimberley G. Nobles	38,255	Peter Wied	43,264
Soyeon Laub	39,266	Douglas Carsten	43,534
Raj Sardesai	39,825	Nicola Bird	P45,478
Samuel K. Lu	40,707	Andrew Choung	P46,622
Lisa Partain	40,763	Julia A. Hodge	46,775
Flavio Rose	40,791		
Benjamin Hattenbach	41,820		

(all of the same address), and any and all attorneys associated therewith after this date, individually and collectively my attorneys to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent.

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Bill Hilliard			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Kees Van Prooijen			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Peter Engeldrum			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Jean-Pierre Huber			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Thomas Strother			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

Serial No.:

PATENT

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Peter Bernard			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Post Office Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Joel Warwick			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Post Office Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Keith Ball			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Post Office Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	James Deutch			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Post Office Address: (Include Zip Code)				

Serial No.:

PATENT

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Tammy Baker			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Post Office Address: (Include Zip Code)				

Applicant or Patentee: E-Color, Inc.
 Serial or Patent No.: _____
 Filed or Issued: _____
 For: METHOD AND SYSTEM FOR IMPROVED INTERNET COLOR

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
 (37 CFR 1.9(f) AND 1.27(c) - SMALL BUSINESS CONCERN)**

I hereby declare that I am

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to
 act on behalf of the concern identified below:

NAME OF CONCERN: E-Color, Inc.
 ADDRESS OF CONCERN: 10 U.N. Plaza 5th Floor San Francisco, CA 94102-4966

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled
 _____ by inventor(s)

described in

- ☐ the specification filed herewith
☐ application serial no. _____, filed _
☐ patent no. _____, issued

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). *NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME: Bill Hilliard

ADDRESS: 10 U.N. Plaza 5th Floor San Francisco, CA 94102-4966

☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME: _____

ADDRESS: _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements are the like so made are punishable by fine or imprisonment, or both, under section 1001 or Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: _____

TITLE OF PERSON OTHER THAN OWNER: _____

ADDRESS OF PERSON SIGNING: _____

SIGNATURE: _____

DATE: _____

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<u>Attorney</u>	<u>Reg. No.</u>	<u>Attorney</u>	<u>Reg. No.</u>
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Benjamin Hattenbach	41,820		

(all of the same address), and any and all attorneys associated therewith after this date, individually and collectively my attorneys to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent.

INVENTOR'S SIGNATURE:				Date:	
Inventor's Name: (typed)	Bill Hilliard				
	First	MI	Family Name	Citizenship US	
Residence:				(State/Foreign Country):	
Mailing Address: (Include Zip Code)					

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Kees Van Prooijen			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Peter Engeldrum			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Jean-Pierre Huber			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Thomas Strother			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Mailing Address: (Include Zip Code)				

Serial No.:

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Peter Bernard			
	First	MI	Family Name	Citizenship US (State/Foreign Country):
Residence:				
Post Office Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Joel Warwick			
	First	MI	Family Name	Citizenship US (State/Foreign Country):
Residence:				
Post Office Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	Keith Ball			
	First	MI	Family Name	Citizenship US (State/Foreign Country):
Residence:				
Post Office Address: (Include Zip Code)				

INVENTOR's SIGNATURE:				Date:
Inventor's Name: (typed)	James Deutch			
	First	MI	Family Name	Citizenship US (State/Foreign Country):
Residence:				
Post Office Address: (Include Zip Code)				

Serial No.:

PATENT

INVENTOR'S SIGNATURE:				Date:
Inventor's Name: (typed)	Tammy Baker			
	First	MI	Family Name	Citizenship US
Residence:				(State/Foreign Country):
Post Office Address: (Include Zip Code)				